

AIR TRANSPORT MEETING

May 20, 2004

MINUTES

Attendees

See attached list.

Welcome and Introductions

Maureen McNeil, EMS Division Chief, welcomed the group. She said the air transport meeting had been convened to develop key points/recommendations on air medical transport to assist the local EMS agencies (LEMSAs) in the development of local EMS air transport policies/procedures and provide for some consistency throughout the state. The group was asked not to discuss specific incidents, but to focus on the discussion points presented.

Discussion Points

The discussion points used for the meeting were developed by incorporating policies from selected LEMSAs statewide. Each point was explained and the participants provided comments and recommended changes as shown below.

(Note: Additions to the discussion points from the meeting appear in underlined, italic type.)

1. Definitions (per Title 22, Chapter 8 Prehospital EMS Aircraft Regulations)

- Air ambulance (including staffing)
- Rescue aircraft (including staffing)
 - ALS rescue
 - BLS rescue

COMMENTS: The definitions are provided in the aircraft regulations. The state regulations are a minimum and some LEMSAs may have further restrictions in local policies or ordinances. The LEMSAs may exceed the minimum standards set forth in state regulations to meet the needs of the community, however, statewide consistency is encouraged. Providers should work with LEMSAs to ensure local policies/ordinances are upheld.

2. Roles and Responsibilities

- Incident Commander
- Obligations for assessing incident regarding patient transport (air vs. ground)
- Determination of air rescue vs. air ambulance (based on availability and patient's condition) within local EMS policy

- Responsibilities in patient care transfer

COMMENT: Health and Safety Code [Section 1798.6] defines the incident commander (highest medical level = patient care). [Also, Section 409.3 of Penal Code] This should be referenced in the recommendations developed.

Group consensus: LEMSAs should establish policies, procedures, and standards of care; written air transport agreements; air ambulance committees; and a continuous quality improvement (CQI) system with all public and private air transport providers within their system. Establishment of an early activation system should also be considered for air ambulances.

- Dispatch center
 - Inform incident commander of craft status for decision making

Group consensus: Dispatchers should be provided training regarding types of aircraft (air ambulance and air rescue) and their uses within the policies of the local jurisdiction. They should also be involved in development of policies as well as CQI.

3. Authorization of Operation of EMS Aircraft

- LEMSA
 - Authorization and medical qualifications of aircraft
 - Local ordinance
 - Definition of operating area (including service area map)
 - Out-of-jurisdiction aircraft
- EMSA
 - Medical authorization/classification of rescue aircraft (for CHP, Dept. of Forestry, National Guard)

Group consensus: LEMSA and EMSA authorization and qualifications should be based upon medical qualifications and not mechanical features.

4. Communications

- Methods of communication (e.g., use CalCORD, fire red, but not fire white)
- Protocol for communications (e.g., conditions for dispatch to IC, IC to aircraft, aircraft to aircraft, aircraft to hospital)
- Reporting communications difficulties

Group consensus: Local agencies should have a communication mechanism in place to ensure all aircraft operating within area are aware of all others.

5. Requesting EMS Aircraft

- Who can request
- Conditions for request that are best for the patient and overall safety requirements
- Suitability of incident site for specific aircraft
 - incident type
 - patient status
 - multi-casualty
 - weather
 - other

Group consensus: Patient and overall safety should be added as considerations under conditions for requesting aircraft.

- Criteria for request for specific type of aircraft: air ambulance, air rescue (ALS or BLS)
 - incident type
 - physical rescue
 - response times (linked with patient status)
 - other

6. Canceling Aircraft

- Who has authority
- Who is notified and how (i.e., protocol)
- Conditions for cancellation after patient evaluation by on-scene personnel, in compliance with local policy
 - Patient status
 - Type of condition or injury
 - Response time or availability of other aircraft or ground transport
 - Availability of more appropriate craft
 - Other

Group consensus: Conditions for cancellation should be determined after on-scene evaluation of patient, based upon local policy.

7. Scene Safety

- Prioritizing use of landing zone (authorization and criteria)
- Protocol for multiple aircraft

8. EMS Aircraft *Medical* Quality Improvement

- Quality improvement oversight

- LEMSA role
- Provider role
- Quality improvement meetings
 - Who convenes
 - Who attends
 - Schedule (e.g., at least quarterly)
 - Format

Group consensus: Medical director of provider agencies should work with LEMSA medical directors to communicate air transport issues.

- Gathering and maintaining data on:
 - Number of responses
 - Number of cancellations
 - Number of transports
 - Number of incidents of aircraft unavailability
 - Other
- Case review
 - Case data research
- Filing complaints, grievances *at lowest level possible (i.e., agency to agency first, then LEMSAs)*
- Investigating complaints, grievances

Group consensus: Issues should be resolved at the lowest possible level. All EMS system participants (LEMSAs, field personnel, air transport personnel, dispatch, others) should be educated on the system policies.

Meeting Summary and Next Steps

This consensus document will be presented at the June meeting of the Emergency Medical Services Administrators' Association (EMSACC) for input. It will then be sent to all interested parties for comment prior to developing the final key points on air medical transport to assist the LEMSAs in the development of local air transport policies/procedures.

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Attendees

Agency	Name
AirMed Team	Barry Hickerson
AirMed Team, Redding	Shalyn Sutton-Prudhomme
Cal City Fire	Karl Hegle
Calstar	Michael Baulch
Calstar	Tom Goff
Calstar	Linda Kirkbride
Calstar 7	Lisa Abeloe
Calstar 7	Suzanne Bradford
CHP Air Operations, Sacramento	Kymberly Mitchell
CHP Air Operations, Sacramento	Keith Dittimus
Contra Costa EMS EMDAC	Joe Barger
Costal Valley EMS, Base Station	Tucker Bierbaum, Med. Dir.
Costal Valleys EMS Agency	Bonny Martignoni
East Bay Regional Parks	Mark Capcin
East Bay Regional Parks Police/Fire	Sgt. Andrew D. White
Enloe Flight Care, Chico	Kim Howard
Enloe Medical Center	Marty Marshall
FAA SAC FSDO	Dennis L. Day
LA City Fire	Paul Shakstad
LA County Fire	Lee Benson
LA County Sheriff	Sgt. Mike Griffin
LA County Sheriff	Jack Ewell
LA County Sheriff	Chris Young
Mercy Air Ambulance	Brenda Poulson
Mercy Air Ambulance, Redding	John Johnson
Mercy Air Ambulance, Redding	Richard Daly
Mercy Air Service	Roy Cox
Mercy Flights Medfor, OR	Mark Gibson
Mountain Valley EMS Assc.	Steve Andriese
Ontario Fire	Ray Ramirez
Reach	Sean Russel
Sacramento Metro Fire	Ric Maloney
Sacramento Metro Fire	Steve Cantelme
Sacramento Metro Fire	Patrick VanDenBrocke
Sacramento Metro Fire	Michael Ernst
San Luis Obispo EMS Agency	Tom Lynch
SBCO Sheriff	Ray Ramirez

Sonoma County Sheriff	Eric Thomson
Sonoma County Sheriff	Roger Y. Rude
S-SV EMA Agency	Leonard Inch
UC Davis Life Flight	Christine Murillo
UC Stanford Life Flight	Agripina Villegas